



ETHICS COMMISSION
CITY AND COUNTY OF HONOLULU
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CONFIDENTIAL FINANCIAL DISCLOSURE
TO BE FILED BY:
Board and Commission Members

Read the attached instruction sheet before completing this form. *TYPE or PRINT clearly.*

PART A BOARD AND COMMISSION MEMBERS COMPLETE

Type of Filing: ☐ Initial ☐ Annual ☐ Leaving Office

Name _____ City Position Board/Commission Member
LAST FIRST MIDDLE INITIAL (Jr., Sr., III)

Board/Commission Name _____ Work Phone _____ Fax _____

Home Mailing Address _____ Email Address _____
Home Phone _____

Name of Spouse _____ Names of Dependent Children _____

PART B BOARD AND COMMISSION MEMBERS COMPLETE

1. **INCOME** of \$1,000 or more, source, services rendered, and timeframe during the preceding calendar year. Include income of spouse and dependent children.

☐ None ☐ Additional sheets attached

RECIPIENT	EMPLOYER/SOURCE	POSITION/ SERVICE RENDERED	WHEN	ANNUAL INCOME
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. **CREDITORS** to whom you, your spouse, and dependent children owed \$3,000 or more during the preceding calendar year.

☐ None ☐ Additional sheets attached

PERSON(S) INCURRING DEBT	CREDITOR	ORIGINAL LOAN AMT.	AMOUNT OUTSTANDING
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. **OWNERSHIP OR INTERESTS HELD IN BUSINESSES IN HAWAII** during the preceding calendar year valued at \$5,000 or more or equal to 10% of the ownership of the business.

☐ None ☐ Additional sheets attached

OWNER(S)	BUSINESS NAME & ADDRESS	NATURE OF BUSINESS	% OF INTEREST	VALUE OF INTEREST
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. **OWNERSHIP OR INTERESTS TRANSFERRED IN BUSINESSES IN HAWAII** during the preceding calendar year valued at \$5,000 or more or equal to 10% of the ownership of the business.

☐ None ☐ Additional sheets attached

OWNERSHIP OR INTEREST	DATE OF TRANSFER
_____	_____
_____	_____

5. **FIDUCIARY POSITIONS HELD IN A BUSINESS** (officership, directorship, trusteeship or other fiduciary relationship) during the preceding calendar year, the term of office, and the annual compensation.

☐ None ☐ Additional sheets attached

POSITION	HOLDER	NAME & ADDRESS OF BUSINESS OR ORGANIZATION	TERM OF OFFICE	ANNUAL COMPENSATION

6. **CREDITOR INTERESTS IN INSOLVENT BUSINESS** held during the preceding calendar year worth \$5,000 or more.

☐ None ☐ Additional sheets attached

HOLDER	NAME & ADDRESS OF BUSINESS	NATURE OF INTEREST	VALUE

7. **CLIENTS PERSONALLY REPRESENTED BEFORE CITY AGENCIES** for a fee or compensation during the preceding calendar year.

☐ None ☐ Additional sheets attached

REPRESENTATIVE	CLIENT	CITY AGENCY	NATURE OF BUSINESS

8. **REAL PROPERTY OWNED** in the City and County of Honolulu. Report interests valued at \$10,000 or more.

☐ None ☐ Additional sheets attached

OWNER(S)	TAX MAP KEY NUMBER & STREET	VALUE	YEAR OBTAINED

9. **REAL PROPERTY TRANSFERRED OR OBTAINED** in the City and County of Honolulu during the preceding calendar year.

☐ None ☐ Additional sheets attached

SELLER/DONOR	BUYER/DONEE	DATE	PRICE	TAX MAP KEY NUMBER & STREET ADDRESS

I declare that I have used all reasonable diligence in reviewing and preparing this form and in reviewing the Ethics Checklist Refresher document in its entirety. To the best of my knowledge, the foregoing is true and complete. I understand that this form is subject to audit and any errors or omissions may be found to be a violation of the City's ethics laws and I may be subject to discipline, a civil fine, or both.

Signature: _____ Date: _____

PART C ETHICS COMMISSION COMPLETES

Notes: _____

Reviewed by: _____ Date: _____